



COMDTINST 1754.10B

APRIL 2, 2004

COMMANDANT INSTRUCTION 1754.10B

Subj: REPORTING AND RESPONDING TO RAPE AND SEXUAL ASSAULT ALLEGATIONS

Ref: (a) Family Advocacy Program, COMDTINST 1750.7 (series)
(b) Military Justice Manual, COMDTINST 5810.1 (series)
(c) United States Coast Guard Regulations 1992, COMDTINST M5000.3 (series)
(d) Mandatory Reporting of Incidents to the Coast Guard Investigative Service and Requesting Investigative Assistance, COMDTINST 5520.5 (series)
(e) Medical Manual, COMDTINST M6000.1, (series)
(f) Department of Justice Office for Victims of Crime Sexual Assault Nurse Examiner Development and Operations Guide, NCJ 170609

1. PURPOSE. To establish policy and procedures for responding to rape and sexual assault allegations. These procedures pertain to both the victim and the alleged perpetrator and include reporting requirements, continuity of care (i.e., physical and emotional) and geographic separation of the victim and the accused.
2. ACTION. Area and district commanders, commanders of maintenance and logistic commands, Superintendent, commanding officers of headquarters units, assistant commandants for directorates, Judge Advocate General, and special staff offices at Headquarters shall ensure that the provisions of this Instruction are followed. Internet release authorized.
3. DIRECTIVES AFFECTED. Reporting of Rape and Sexual Assault, COMDTINST 1754.10A is cancelled.
4. APPLICATION. This Instruction applies in cases of rape and/or sexual assault allegations in which a Coast Guard active duty member is the victim or accused, or; a Coast Guard Reserve member on active duty or in a drill status is the victim or the accused, or; a Coast Guard civilian employee or a Coast Guard dependent is the victim or the accused, and the incident occurs on Coast Guard controlled property. In the event that a Coast Guard civilian employee or a Coast Guard dependent is the victim of rape or sexual assault that does not occur on Coast Guard controlled property, and the alleged perpetrator is not a Coast Guard member or Coast Guard employee, the cognizant Employee Assistance Program Coordinator (EAPC) will provide intervention and support services

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NON-STANDARD DISTRIBUTION:

to the victim upon request. The Superintendent of the Coast Guard Academy may supplement the procedures in this Instruction to effectively utilize the unique resources available to the Academy in cases involving cadets and officer candidates as victims but must still follow reporting requirements. Reference (a) establishes policies and procedures for reporting sexual abuse incidents occurring between family members or committed by caregivers and should be followed in those situations.

5. DISCUSSION.

- a. According to data from the Bureau of Justice Statistics, assaults by a friend or acquaintance make up approximately 80% of all sexual assaults. A perpetrator of sexual assault is likely to be well groomed, charismatic, likeable, a good performer, etc., as it is these elements that encourage the victim to trust him or her.
- b. While the rights of crime victims are addressed by both state and federal legislation, sexual assault victims are faced with issues unique to that crime. Often, sexual assault is incorrectly viewed as neither violent nor criminal when it occurs between acquaintances or when alcohol is involved. Further, the victim is made to feel responsible for his or her own predicament and often feels re-victimized by the legal or investigative process. It is important to understand that all sexual assaults are criminal acts of violence. They often leave the victim psychologically and physically traumatized, regardless of the circumstances surrounding the incident.
- c. Sexual assault victims are at a higher risk for suicidal ideation, gestures and attempts. Most, at a minimum, will show signs of Rape Trauma Syndrome, which is similar in nature to Post Traumatic Stress Disorder (PTSD).
- d. The alleged perpetrator faces potential Uniform Code of Military Justice charges, criminal charges, administrative actions, loss of career, loss of freedom, and should be considered at an increased risk for suicide as well.

6. DEFINITIONS.

- a. Assault. The use of unlawful force or violence either as an overt act with the intent of inflicting bodily harm, or as an unlawful demonstration of violence, through an intentional or culpably negligent act or omission, either of which creates in the mind of another a reasonable apprehension of receiving immediate bodily harm.

(1) Sexual Assault. For purposes of this Instruction, the term sexual assault will be used generically to include all of the terms listed in 6.a.(1)(a)-(e) below, and applies to adult victims and perpetrators. (COMDTINST 1750.7 (series) addresses sexual assaults involving minors).

- (a) Assault with Intent to Commit Rape. An assault with the intent to commit rape. The accused must have intended to complete the offense of rape and to overcome any resistance by force.
- (b) Assault with Intent to Commit Sodomy. An assault against a human being committed with the specific intent of completing the offense of sodomy.

- (c) Forcible Sodomy. An act done by force, and without consent, whereby one person takes into his/her mouth or anus the sexual organ of another person (of the same or opposite sex); places his/her sexual organ in the mouth or anus of another person; or places his/her sexual organ in any opening of the body other than the sexual parts of another person. Penetration, however slight, is sufficient to complete the offense.
- (d) Indecent Assault. An assault with the intent to gratify the lust or sexual desires of the accused.
- (e) Rape. An act of penile-vaginal intercourse by force and without consent. Penetration, however slight, is sufficient to complete the offense.
- b. Lack of Consent. Can include situations where resistance is overcome by duress; acts of violence or harm or the threat of; the victim lacks mental or physical faculties to resist; the victim is unconscious; the victim is of unsound mind; or the victim is incapable of consent due to intoxication by alcohol or other drugs.
- c. Victim. Any person who either reports the commission of a sexual assault upon himself or herself or is identified, based upon the report of another person or other information, as a person who has been subjected to a sexual assault.
- d. Victim Support Person. A person who can provide emotional support to the victim during interviews and medical procedures. The support person may be present, but is not to participate (e.g., prompting the victim) during the interview process. This person can be the EAPC, a Victim Support Person recommended by the EAPC, or another person chosen by the victim.
- 7. POLICY. Sexual assault violates the Coast Guard's core values and will not be tolerated. All members of the Coast Guard shall foster an environment that does not excuse, tolerate, or mitigate sexual assault. Helping service members and their families to cope with a sexual assault incident is the most difficult challenge faced by commands. This policy is intended to help commands effectively confront this challenge.
 - a. All Coast Guard personnel, military and civilian, shall follow the procedures of this Instruction, and the reporting procedures of reference (d), to ensure the sensitive, coordinated, and effective management of all sexual assault cases covered by this Instruction. Sexual assault cases can be among the most difficult to litigate, and immediate involvement of trained investigators, forensic medical teams and Judge Advocates frequently make the difference in preserving evidence that may be critical in resolving the matter. These cases also often raise complex evidentiary and other legal issues.
 - b. Coast Guard medical personnel are expected to provide the victim any required first aid. However, the Coast Guard medical personnel are not trained or equipped to provide forensic rape exams or analysis. This service will be coordinated by Coast Guard Investigative Service (CGIS) and obtained from trained forensic rape medical teams in the local community within 24 hours of incident occurring. In the rare event that appropriate local community medical resources do not exist, CGIS may request CG medical forensic assistance from the MLC's. ONLY Coast Guard medical personnel, who have been trained as Sexual Assault Forensic Examiners (SAFE) in

accordance with Department of Justice, Office for Victims of Crime Sexual Assault Nurse Examiner (SANE) criteria, will respond.

- c. All parties involved shall, throughout the investigative, medical and legal processes, ensure that the victim's privacy is protected to the greatest extent possible. Failure to protect the victim's rights and privacy can result in further trauma and re-victimization.
- d. All Coast Guard personnel, military and civilian, shall attend mandatory annual training on sexual assault prevention and response, to include information on rape trauma syndrome, responding to false allegations, local (state) laws and statutes pertaining to victim's rights and date/acquaintance assailant profile. This training will be provided or coordinated by the cognizant EAPC; in coordination with the servicing legal office.
- e. Commands shall ensure that each unit has a Victim Support Person identified. This person, not necessarily attached to the unit, will be recommended by the cognizant Employee Assistance Program Coordinator to the command for endorsement. The victim support person shall attend the mandatory 2-day Victim Support Person Training funded by G-WKW-2.
- f. If the consumption of alcohol by the victim is a factor in the assault, the consumption of alcohol will be handled as an alcohol related situation vice an alcohol incident for administrative purposes and the victim will be referred to screening and treatment. If the screening determines alcohol treatment is necessary, and the victim refuses or fails treatment, the use of alcohol will be considered an alcohol incident for administrative purposes.
- g. The Coast Guard shall ensure immediate and appropriate counseling intervention for the victim and the alleged perpetrator as recommended by the EAPC.
- h. Privacy Provisions: The Privacy Act and the Health Insurance Portability and Accountability Act (HIPAA) of 1996 apply to records that contain protected health information. These acts and regulations place procedural requirements on the use and disclosure of such information. The Coast Guard Health Care Program may disclose protected health information about an individual whom it reasonably believes to be a victim of violence or sexual assault to a government authority, including a social service or protective services agency, authorized by law to receive such reports if:
 - (1) The victim agrees to the disclosure; or
 - (2) The disclosure is required by law and the disclosure complies with and is limited to the relevant requirements of such law; or
 - (3) The disclosure is expressly authorized by statute or regulation; and
 - (a) The Coast Guard Health Care Program, in the exercise of professional judgment, believes the disclosure to be necessary to prevent serious harm to the victim or other potential victims; or
 - (b) The victim is incapacitated and unable to agree to disclose their protected health information. A law enforcement or public official, authorized to receive the report,

shall verify the purpose that such disclosure is sought, that it is not intended to be used against the victim, and that immediate enforcement activity is dependent upon the disclosure and would be adversely affected by waiting until the individual is able to agree to the disclosure.

8. PROCEDURES.

a. CO's and OINC's not deployed shall:

- (1) Immediately inform **CGIS** and the **EAPC** (or Work Life Supervisor if the EAPC is not available) and the servicing legal office of any alleged or suspected sexual assault covered by this Instruction, and seek medical attention in the local community for the victim. If the command is underway, see reference (d) and section 8.b. of this Instruction.
- (2) Advise the victim not to destroy possible evidence by bathing, douching, changing clothes, eating, drinking, or cleaning in any way if alleged rape or sexual assault has just occurred.
- (3) Ask the victim if they would like a Victim Support Person assigned and, if requested by the victim, immediately assign one.
- (4) Ensure the victim understands the medical, investigative, and legal process and is advised of his/her victim support rights.
- (5) Safeguard the victim and the accused from any formal or informal investigative interviews or inquiries except those conducted by CGIS. Collect only the necessary information (e.g., victim's identity, location and time of incident, name and/or description of offender(s)). Do not ask detailed questions and/or pressure the victim for responses. Any administrative or punitive action to be taken against a victim or accused shall be delayed until after the investigative phase is completed.
- (6) Ask the victim if they would like a Chaplain to be notified and notify the Chaplain only when the victim specifically asks for Chaplain support.
- (7) If the perpetrator is a Coast Guard member, consult with the cognizant EAPC to determine resource referrals.
- (8) Consult with the servicing legal office and the investigating CGIS office prior to taking any administrative action against the victim or the accused.
- (9) Consult with the EAPC to determine whether the victim or the accused should be geographically separated under the circumstances.
- (10) Immediately reassign duties to different working areas, and if possible a different location with a "no contact" order if the victim and the accused work together.
- (11) Consider designating the victim "sick in quarters" if the victim is emotionally unfit to resume work.

(12) Ensure completion of mandatory annual training on the correct use of this Instruction by all unit personnel, both military and civilian. Training shall be provided or coordinated by the cognizant EAPC.

(13) Ensure the sensitive, coordinated and effective management of sexual assault cases.

b. Deployed Commands shall:

(1) Immediately inform the **Operational Commander, local CGIS office, EAPC** (or Work-life supervisor if EAPC not available) and servicing legal office, of any actual, alleged or suspected sexual assault covered under this Instruction.

(2) Advise the victim not to destroy possible evidence by bathing, douching, changing clothes, eating, drinking or cleaning in any way if an alleged rape or sexual assault has just occurred.

(3) Ask the victim if they would like a Victim Support Person assigned and, if requested by the victim, immediately assign one.

(4) If the alleged sexual assault occurs while underway or is in a remote location where transport to a local medical community facility is unlikely, **ensure medical personnel make contact with CGIS for guidance on collection and storage of physical evidence. Medical providers untrained in sexual assault forensic evidence collection shall not attempt to collect evidence without guidance from CGIS.**

(5) Ensure the victim understands the medical, investigative, and legal process and is advised of his/her victim support rights.

(6) Safeguard victim and accused from any formal or informal investigative interviews or inquiries except those conducted by CGIS. Collect only the necessary information (e.g., victim's identity, location and time of incident, name and/or description of offender(s)). Do not ask detailed questions and/or pressure the victim for responses. Any administrative or punitive action to be taken against a victim or accused shall be delayed until after the investigative phase is completed.

(7) Ask the victim if they would like a Chaplain to be notified, and notify the Chaplain only when a victim specifically asks for Chaplain support.

(8) If the perpetrator is a Coast Guard member, consult with the cognizant EAPC to determine resource referrals.

(9) Consult with the servicing legal office and investigating CGIS office prior to taking any administrative action against the victim or the accused.

(10) Consult the EAPC to determine whether the victim or the accused should be geographically separated under the circumstances.

(11) Immediately separate the victim and the accused if they share the same berthing space.

- (12) Immediately reassign duties to different working areas and, if possible a different location with a “no contact” order if the victim and the accused work together.
- (13) Consider designating the victim “sick in quarters” if the victim is emotionally unfit to resume work.
- (14) If at all possible, be prepared to MEDEVAC the victim to a military treatment facility or shore unit within 24 hours.
- (15) Ensure the completion of mandatory annual all-hands training on the use of this Instruction, which shall be provided or coordinated by the cognizant EAPC.
- (16) Ensure the sensitive, coordinated and effective management of sexual assault cases.

c. Work-Life Supervisor shall:

- (1) Upon notification by the CO or OINC that an alleged rape or sexual assault has occurred, notify the EAPC as soon as possible, and confirm that CGIS has been notified.
- (2) Direct and ensure the EAPC refers all technical and policy questions to Commandant (G-WKW-2).
- (3) Attend mandatory annual training on use of this Instruction, which shall be provided or coordinated by the cognizant EAPC.

d. EAPC’s shall:

- (1) Serve as consultant to the CO/OINC on Sexual Assault issues or cases.
- (2) Make contact with the victim.
- (3) Offer counseling services to the victim.
- (4) Assist commands with appropriate resource referrals for the accused if he/she is a Coast Guard member or dependent.
- (5) Notify the victim of their rights under the Federal Victim’s Bill Of Rights contained in the Victim’s Rights and Restitution Act of 1990, Public Law 101-647 (42 U.S.C. 10606); evaluate need for referral to Victim’s Assistance agencies.
- (6) Inform the victim of their right to contact law enforcement authorities.
- (7) Explain to the victim the normal law enforcement procedures that will occur in the next 24 hours so that she/he is aware of and can anticipate future actions/processes.
- (8) Advise the victim not to destroy possible evidence by bathing, douching, changing clothes, eating, drinking, or cleaning in any way if a rape or sexual assault has just occurred.

- (9) Select and recommend Victim Support Persons throughout their AOR.
- (10) Ensure selected Victim Support Persons have received training in victim support intervention.
- (11) Oversee the functions of the Victim Support Persons.
- (12) Coordinate with the CO/OINC to provide a Victim Support Person if requested by the victim.
- (13) Identify local community medical treatment facilities equipped to provide forensic medical exams specific to sexual assault victims.
- (14) Provide case management to ensure continuity of care.
- (15) Report the following information to Commandant (G-WKW-2), via secure fax (1-202-267-4474).
 - (a) Name and social security number of victim (and sponsor if the victim is a dependent).
 - (b) Relationship to sponsor.
 - (c) Date of alleged sexual assault.
 - (d) Rank/Grade, District and Unit of the victim.
 - (e) Age/Marital Status/Type of Housing of the victim.
 - (f) Nature of the event (Sexual Assault or Rape).
 - (g) Whether or not the victim was offered counseling services.
 - (h) Date EAPC notified.
 - (i) Date CGIS notified.
 - (j) A brief summary of the event.
 - (k) Whether or not geographic separation was recommended.
 - (l) Command's Plan of Action.
- (16) Maintain a contact log on rape and sexual assault reports. EAPC's shall only disseminate information as directed by this Instruction and as permitted by privacy laws and the Victim's Rights and Restitution Act of 1990, Public Law 101-647 (42 U.S.C. 10606).
- (17) Notify the EAPC of a receiving unit when a sexual assault victim transfers to a new area of responsibility, if the victim is still receiving treatment and consents.

- (18) Be familiar with local, state, and federal laws concerning sexual assault.
 - (19) Provide outreach and ensure commands within the EAPC's AOR are familiar with this Instruction and reporting requirements.
 - (20) Provide or coordinate mandatory annual training to CO's, XO's, OINC's, XPO's, medical staff, CGIS, field units and civilian personnel on sexual assault prevention and response, to include information on rape trauma syndrome, responding to false allegations, local (state) laws and statutes pertaining to victim's rights and date/acquaintance assailant profile.
 - (21) Provide rape and sexual assault information handout for victims and families.
 - (22) Maintain a list of regional Sexual Assault Nurse Examiner (SANE) programs and trainers.
- e. Coast Guard Medical Facilities shall:
- (1) If a member is initially reporting any actual, alleged or suspected sexual assault covered under this Instruction, immediately inform the cognizant **Command, CGIS and EAPC** (or Work- Life Supervisor if the EAPC is not available). The victim should be provided the minimal amount of first aid required and shall be immediately transported to local community medical facility that provides forensic rape and or sexual assault exams.
 - (2) In the absence of appropriate community resources and at the specific request of CGIS, ensure that selected Coast Guard medical personnel are trained as Sexual Assault Forensic Examiners (SAFE), in accordance with Department of Justice, Office for Victims of Crime Sexual Assault Nurse Examiner (SANE) criteria.
 - (3) If directed by the Cognizant MLC to provide forensic sexual assault exams in support of a CGIS request, ensure that the proper medical equipment, supplies and medications are in place, including an FDA approved Forensic Rape Kit, colposcope, 35mm camera with a 50mm macro lens, swab dryer, chain of evidence forms, and medications for the treatment of STD's and pregnancy.
 - (4) Receive training in determining possible induced date rape drug use and, when indicated, screen for flunitrazepam (Rohypnol) and GHB within 72 hours of the sexual assault.
 - (5) Upon arrival of newly assigned health services personnel, complete training on use of this Instruction, which shall be provided or coordinated by the EAPC.
- f. CGIS shall:
- (1) Conduct an investigation in accordance with the Investigations Manual, COMDTINST 5527.1 (series) and the Criminal Investigations Field Guide, COMDTINST 5527.3(series).
 - (2) Notify the cognizant EAPC of the alleged rape or sexual assault.

- (3) Notify the cognizant EAPC anytime Initial Information for Victims and Witnesses of Crime form is issued (DD2701).
- (4) Advise the victim that they have the option to have a Victim Support Person during any interview. Support persons are not to be involved in the interview process or in prompting the victim during the interview process. If the victim requests a support person, make every reasonable effort to ensure that the support person is present during any interview or medical procedure. However, agents should not unduly delay investigative action until the arrival of a support person.
- (5) If no qualified medical personnel exist in the local community to provide forensic rape exams/analysis, request assistance from MLC.
- (6) Ensure all agents attend mandatory annual training on use of this Instruction, which shall be provided or coordinated by the EAPC.

g. Command Chaplain shall:

- (1) Provide and/or coordinate appropriate spiritual care and/or referral services if requested by the victim.
- (2) Participate appropriately in command climate stabilization responses.
- (3) Ensure all chaplains attend mandatory annual training on use of this Instruction, which shall be provided or coordinated by the EAPC.

h. Victim Support Person shall:

- (1) Provide emotional support and assistance to the victim as needed/requested (e.g., accompany to interviews, medical procedures, contact Chaplain, family, etc). The support person is NOT to function in the role of counselor or investigator, nor participate during an investigative interview or counseling session.
- (2) Provide assistance to the victim by offering to and/or helping to secure basic needs (e.g., provide clothing to wear from hospital, arrange transportation, contact family member/friend, etc., as requested by victim).
- (3) Make follow-up telephone contact(s) with the victim to provide emotional support and to determine if additional referral services are requested. Also assist the victim with contacting and scheduling follow-up counseling appointments.
- (4) Attend mandatory annual training, on use of this Instruction, which shall be provided or coordinated by the EAPC.

i. Commanders of Maintenance and Logistics Command shall:

- (1) Ensure that all notifications have been made to the appropriate EAPC, CGIS, and involved commands by a Judge Advocate.

- (2) Ensure that a Judge Advocate advises the victim and any witness of their rights under the Victim Witness Assistance Program, in accordance with reference (b).
- (3) Maintain an updated list of selected Coast Guard medical personnel trained and qualified as Sexual Assault Forensic Examiners.
- (4) At request of CGIS, provide the name of a trained CG Sexual Assault Forensic Examiner.
- (5) Attend mandatory annual training on use of this Instruction, which shall be provided or coordinated by the EAPC.

j. Commandant (G-WKH) shall:

- (1) Identify a program to train selected Coast Guard medical personnel as Sexual Assault Forensic Examiners and coordinate with the MLC's to ensure each MLC has a minimum of two trained medical personnel.
- (2) Provide an updated list of selected Coast Guard medical personnel trained and qualified as Sexual Assault Forensic Examiners to the Maintenance and Logistics Commands.

k. Commandant (G-WKW) shall:

- (1) Provide direct technical guidance to EAPCs and Work-Life staffs about sexual assault.
- (2) Conduct regular Quality Assurance Reviews of the EAPCs to ensure compliance with this Instruction.
- (3) When necessary, facilitate action by CGPC after a Commanding Officer makes a decision of geographic separation for either the victim or the accused.
- (4) Maintain statistical data on sexual assault cases.
- (5) Provide, coordinate and conduct necessary training to maintain the Victim Support Person program.

9. ENVIRONMENTAL ASPECT AND IMPACT CONSIDERATIONS. Environmental considerations were examined in the development of this directive and have been determined to be not applicable.

10. FORMS AVAILABILITY. None

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A handwritten signature in black ink, appearing to read "TH Collins". The signature is fluid and cursive, with the first name "TH" being more prominent and stylized than the last name "Collins".

THOMAS H. COLLINS
Admiral, U.S. Coast Guard
Commandant

Encl: (1) Rape/Sexual Assault Protocol Checklist

Rape/Sexual Assault Protocol Checklist

Who This Is For	Area and district commanders; commanders of maintenance and logistic commands; commanding officers of headquarters units; assistant commandants for directorates, Judge Advocate General, and special staff offices at Headquarters; Superintendent, U.S. Coast Guard Academy; commanding officers and officers in charge shall be thoroughly familiar with this protocol. <hr/>
Purpose	This guide instructs units on the protocol for responding to rape and sexual assault allegations. These procedures pertain to both alleged victim and alleged perpetrator and include reporting requirements and continuity of care (both physical and emotional). <hr/>
Definitions	Definitions pertinent to rape and sexual assault are listed at the end of this document. <hr/>
Reference Information You Will Need	<p>The following reference information discusses reporting and responding to rape and alleged sexual assault.</p> <ul style="list-style-type: none">• REPORTING AND RESPONDING TO RAPE AND SEXUAL ASSAULT ALLEGATIONS, COMDTINST 1754.10B• MANDATORY REPORTING OF INCIDENTS TO COAST GUARD INVESTIGATIVE SERVICE AND REQUESTING INVESTIGATIVE ASSISTANCE, COMDTINST 5520.5 (series) <hr/>
Responsibility to Report	Active duty personnel, who have knowledge that a rape or sexual assault has occurred, must report this information to their command. <hr/>
Command Action	<p>Commanding Officers/Officers in Charge are required to take prompt action upon learning of a reported rape or sexual assault.</p> <p>Specific actions are listed on the following pages for reports of rape/sexual assault when the victim is:</p> <ol style="list-style-type: none">1. an active duty or reserve member under orders; or2. a Coast Guard Family Member or Civilian Employee. <hr/>

**Victim is
Active Duty or
Reserve
Under Orders**

If the victim is an Active Duty member or a Reserve member under orders, the following steps shall be followed by the command.

Detailed information on specific actions to take is found in COMDTINST 1754.10B.

Step	Command Action
1	Ensure safety of victim.
2	Contact CGIS immediately. <ul style="list-style-type: none">• Only CGIS is permitted to investigate rape and sexual assault cases within the Coast Guard.
3	Assign, if requested by member, a Victim Support Person to accompany member at all times, when possible.
4	Do not permit member to change clothes or shoes, shower, wash hands or brush teeth if within first 24 hours.
5	Contact an EAPC to report and assist with appropriate resource referrals for victim support and perpetrator as applicable.
6	Seek medical attention for the victim. <ul style="list-style-type: none">• CGIS will facilitate immediate forensic medical examination at the nearest medical facility <u>that treats survivors of sexual assault</u>. If the victim shows no outward physical injuries, he/she must still seek medical examination for diagnosis and treatment of internal injuries, sexually transmitted diseases, and possible pregnancies.
7	Inform servicing legal office.
8	Immediately reassign duties to different working areas and, if possible, to a different location with a “no contact” order if victim and accused work together.
9	Ensure Follow-up

**Victim is CG
Family
Member or
Civilian
Employee**

If the victim is a Coast Guard family member or civilian employee, the following steps shall be followed by the command.

Detailed information on specific actions to take is found in COMDTINST 1754.10B.

Step	Command Action
1	Ensure safety of individual.
2	Contact CGIS immediately.
3	If individual chooses to report the crime, advise individual not to change clothes or shoes, shower, wash hands or brush teeth prior to medical exam if within the first 24 hours after the assault.
4	Seek medical attention for the victim. <ul style="list-style-type: none">CGIS will facilitate with local authorities immediate forensic medical examination at nearest medical facility that treats survivors of sexual assault.
5	Contact an EAPC to report and assist with appropriate resource referrals for victim support and perpetrator as applicable.
6	Ensure Follow-up.

**Report
Requirements**

Commands are required to make a report to CGIS and EAPC for all cases involving an active duty member or a reserve member under orders.

The following information must be provided to the cognizant EAPC and CGIS:

- Date of incident
 - Full name, rank/rate of victim (and sponsor, if applicable)
 - Unit/District (if active duty)
 - Home address and phone number
 - Age
 - Marital status, number of children
 - Circumstances of situation
 - Unit POC (if active duty)
 - Current status and plan of action
-

**CG Family
Member/
Civilian
Employee
Chooses to
NOT Report
the Incident**

Coast Guard family members and civilian employees of the Coast Guard have the option to NOT report cases of rape/sexual assault to CGIS/EAPC. Commands shall respect the wishes of the victim in these cases.

**Additional
Information**

The following facts are provided for command information as background to understanding the severity of impact to all concerned following a rape or sexual assault.

- 70% of victims show no obvious evidence of physical injury. A rape/sexual assault survivor may have sustained internal injuries, a sexually transmitted disease, or pregnancy from the attack. A medical exam is extremely important. Contact a local rape hotline for a referral to a medical facility that treats rape/sexual assault survivors if not available through the Coast Guard.
 - Sexual Assault victims are at a higher risk for suicidal ideation, gestures, and attempts. Most, at minimum, will show signs of Rape Trauma Syndrome, which is similar in nature to Post Traumatic Stress Disorder (PTSD).
 - According to data from the Bureau of Justice Statistics, assaults by a friend or acquaintance make up approximately 80% of all sexual assaults. A perpetrator of sexual assault is likely to be well-groomed, charismatic, likeable, a good performer, etc., as it is these elements that encourage the victim to trust him or her.
 - Every rape/sexual assault survivor reacts differently. There is no such thing as a “typical” or “normal” response.
 - Many survivors blame themselves for the attack and will say, “It was my fault.” This does NOT mean that a rape/sexual assault did not occur.
 - The perpetrator becomes a high risk for suicide.
-

**Employee
Assistance
Program
Coordinator
(EAPC)**

EAPCs are trained and qualified to appropriately respond to rape and sexual assault victims and to respond as required. Regional EAPCs are:

ISC Boston	(617)223-3477
HQ Support Command	(202)267-0203
ISC Portsmouth	(757)686-4028
ISC Miami	(305)278-6675
ISC New Orleans	(504)942-4058
ISC St Louis	(314)539-3900
ISC Cleveland	(216)902-6356
ISC Alameda	(510)437-5838
ISC San Pedro	(310)732-7587
ISC Seattle	(206)217-6607
ISC Honolulu	(808)541-1585
ISC Kodiak	(907)487-5525
ISC Ketchikan	(907)463-2127

**Coast Guard
Investigative
Service
(CGIS)**

Coast Guard Investigative Service (CGIS) special agents are highly trained to conduct sexual assault and rape investigations, coordinate with local authorities and medical treatment facilities in conducting rape protocol examinations, and to determine the validity of allegations. Regional CGIS office areas are:

CGIS Northeast Region, Boston, MA	(617)557-9091
CGIS Chesapeake Region, Portsmouth, VA	(757)398-6268
CGIS Southeast Region, Miami, FL	(305)278-6850
CGIS Gulf Region, New Orleans, LA	(504)589-4929
CGIS Central Region, Cleveland, OH	(216)902-6136
CGIS Pacific Region, Alameda, CA	(510)437-3406
CGIS Northwest Region, Seattle, WA	(206)220-7308
CGIS Headquarters, Arlington, VA	(202)493-6600

Definitions The following definitions are provided to assist commands in discussing and understanding specific, legal terminology associated with rape and sexual assault.

Assault. The use of unlawful force or violence either as an overt act with the intent of inflicting bodily harm, or as an unlawful demonstration of violence, through an intentional or culpably negligent act or omission, either of which creates in the mind of another a reasonable apprehension of receiving immediate bodily harm.

Sexual Assault. The term sexual assault will be used generically to include all of the terms listed here, and applies to adult victims and perpetrators. (COMDTINST 1750.7 (series) addresses sexual assaults involving minors).

Assault with Intent to Commit Rape. An assault with the intent to commit rape. The accused must have intended to complete the offense of rape and to overcome any resistance by force.

Assault with Intent to Commit Sodomy. An assault against a human being committed with the specific intent of completing the offense of sodomy.

Forcible Sodomy. An act done by force, and without consent, whereby one person takes into his/her mouth or anus the sexual organ of another person (of the same or opposite sex); places his/her sexual organ in the mouth or anus of another person; or places his/her sexual organ in any opening of the body other than the sexual parts of another person. Penetration, however slight, is sufficient to complete the offense.

Indecent Assault. An assault with the intent to gratify the lust or sexual desires of the accused.

Rape. An act of penile-vaginal intercourse by force and without consent. Penetration, however slight, is sufficient to complete the offense.

Lack of Consent: Can include situations where resistance is overcome by duress, acts of violence or harm or the threat of; the victim lacks mental or physical faculties to resist; the victim is unconscious; the victim is of unsound mind; or the victim is incapable of consent due to intoxication by alcohol or other drugs.

**Definitions
(cont.)**

Victim: Any person who either reports the commission of a sexual assault upon himself or herself or is identified, based upon the report of another person or other information, as a person who has been subjected to a sexual assault.

Victim Support Person: A person who can provide emotional support to the victim during interviews and medical procedures. The support person may be present, but is not to participate (e.g., prompting the victim) during the interview process. This person can be the EAPC, a Victim Support Person recommended by the EAPC, or another person chosen by the victim.
